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DATE: July 15, 2008

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TO: Examiner Michael J. Araj, Group Art Unit 3733  
COMPANY: U.S. Patent and Trademark OfficeFAX NUMBER: 571-273-8300  
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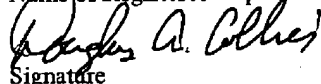
FROM: Douglas A. Collier

DIRECT DIAL: (317) 238-6333

FAX NUMBER: (317) 636-1507

RE: Submission of Power of Attorney for U.S. Patent Application No. 10/825,962 to Aaron D. Markworth

COMMENTS: I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office at 571-273-8300 on:

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PTO/SB/21 (09-04)

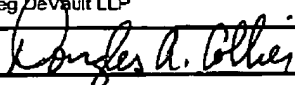
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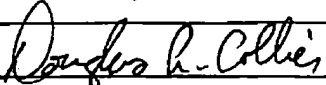
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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	10/825,962
	Filing Date	April 16, 2004
	First Named Inventor	Aaron D. Markworth
	Art Unit	3733
	Examiner Name	Michael J. Aral
Total Number of Pages in This Submission	Attorney Docket Number	MSDI-951

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
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	<input type="checkbox"/> Landscape Table on CD	
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Krieg DeVault LLP		
Signature			
Printed name	Douglas A. Collier		
Date	July 15, 2008	Reg. No.	43,556

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Signature			
Typed or printed name	Douglas A. Collier	Date	July 15, 2008

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**STATEMENT UNDER 37 CFR 3.73(b)**Applicant/Patent Owner: Kyphon SARIApplication No./Patent No./Control No.: 10/825,962 Filed/Issue Date: April 16, 2004Entitled: PEDICLE SCREW ASSEMBLYKyphon SARI, a Limited Liability Company of Switzerland

(Name of Assignee)

(Type of Assignee: corporation, partnership, university, government agency, etc.)

states that it is:

1. ☒ the assignee of the entire right, title, and interest; or
2. ☐ an assignee of less than the entire right, title and interest  
 (The extent (by percentage) of its ownership interest is \_\_\_\_\_ %)

in the patent application/patent identified above by virtue of either:

- A. ☐ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel \_\_\_\_\_, Frame \_\_\_\_\_, or a true copy of the original assignment is attached.

OR

- B. ☒ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as follows:

1. From: Aaron D. Markworth To: Kyphon Inc.  
 The document was recorded in the United States Patent and Trademark Office at Reel 016015, Frame 0076, or for which a copy thereof is attached.
2. From: Kyphon Inc. To: Medtronic Spine LLC  
 The document was recorded in the United States Patent and Trademark Office at Reel 020993, Frame 0042, or for which a copy thereof is attached.
3. From: Medtronic Spine LLC To: Kyphon SARI  
 The document was recorded in the United States Patent and Trademark Office at Reel 021070, Frame 0278, or for which a copy thereof is attached.

☐ Additional documents in the chain of title are listed on a supplemental sheet.

As required by 37 CFR 3.73(b)(1)(i), the documentary evidence of the chain of title from the original owner to the assignee was, or concurrently is being, submitted for recordation pursuant to 37 CFR 3.11.

[NOTE: A separate copy (i.e., a true copy of the original assignment document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3, to record the assignment in the records of the USPTO. See MPEP 302.08]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

Douglas A. Collier  
 Signature

July 15, 2008

Date

Douglas A. Collier

317-636-4341

Printed or Typed Name

Telephone Number

Attorney (Registration No. 43,556)

Title

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I hereby revoke all previous powers of attorney given in the application identified in the attached statement under 37 CFR 3.73(b).

I hereby appoint:

☒ Practitioner(s) associated with the Customer Number:

52196

OR

☐ Practitioner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used):

Name	Registration Number	Name	Registration Number

as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b).

Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) to:

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E-mail

Assignee Name and Address:

Kyphon SARL  
Pierce-a-Bot 97  
2000 Neuchatel, Switzerland

A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/86 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed.

**SIGNATURE of Assignee of Record**

The individual whose signature and title is supplied below is authorized to act on behalf of the assignee

Signature

Date June 30, 2008

Name

Oern R. Stuge

Telephone

Title

Deputy Director

Managing Officer

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